U.S. Department of Labor Office of Labor-Management Standards
Washington, DC 20210

For Official Use Only

City

State

5. Position in labor organization.

FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P J. 88-25 as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.

E DAREAD THE INSTRUCTIONS CAREFUL	LY BEFORE PREPARING THIS REPORT.
1. File Number U - 22029	2. Fiscal Year Covered From: Through: 31/04
3. Name and address of person filing. Name PAUL F LA BVOA	4. Name, file number, and address of labor organization. Name BCTGM L.U. 19 Labor Organization File Number 0772-303
P.O. Box, Bldg., Room No., if any	P.O. Box, Building and Room Number, if any Street STARST

City

State

Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests

(except as specified in the exclusions set forth in the instructions):			
A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.			
6. Name and address of Employer (including trade name, if any),	7.a. Nature of Interest, Transaction, or Income.		
Name :			
Trade Name, if any:	MA		
P.O. Box, Bldg., Room No., if any	7.b. Amount.		
Street	•		
City	NA		
State ZIP Code + 4			

Signature

15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, compact, and complete. (See the section on penalties in the instructions.)

Telephone Number

		0	f:line
Name	OI.	Person	rining

PAUL F. LABUDA

File Number U-

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.		
Name and address of Business (including trade name, if any).	9. Business deals with:	
Name MEDICAL MYTHAL OF CHIE	a. Labor Organization	
Trade Name, if any:	b. Trust	
P.O. Box, Bldg., Room No., if any	c. Employer	
Street: 2060 E 9TH STAGET	Land C. Cimpoyei	
City CLEVELAND		
State Ottio ZIP Code +4 44-115		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	
Name CLEVELAND BAKELS + THRUSTEMS	3 RD PARTY HOMINISTICATOR	
Trade Name, if any:	BED PARTY HOMINISTRATOR HEALTH + WORFARE FUND	
P.O. Box, Bidg., Room No., if any		
Street 1520 E 1977 SMH	11.b. Approximate dollar value of such dealing.	
City CLEVECATO	12.a. Nature of interest held or income received.	
State Otto ZIP Code + 4 44/4	ATHUDANUS AT SPORTING EVENT + DISCUSSION	
	12.b. Amount. \$ 363.90	
C. Received from any employer (other than an employer covered under	or parts A and B above)	
or from any labor relations consultant to an employer any payment of money	or other thing of value.	
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.	
Name '		
Trade Name, if any:	1	
P.O. Box, Bidg., Room No., if any	N/H	
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City		
State ZIP Code + 4	and distributions are deposits a construction of the secondary of the of the secon	
13.b. Is the Business an Employer or Consultant 1 ?	14.b, Amount of payment.	

Name of Person Filing JAVL F. LABUMA	File Number U-
B. Held an interest in or derived income or economic benefit with monetary value substantial part of which consists of buying from, selling or leasing to, or otherwork of an employer whose employees your labor organization represents or is active (2) any part of which consists of buying from or selling or leasing directly or indicating with your labor organization or with a trust in which your labor organization	wise dealing with the business vely seeking to represent, or lirectly to, or otherwise
8. Name and address of Business (including trade name, if any). Name ROSERT W. BALO + CU. INC. Trade Name, if any: P.O. Box, Bldg., Room No., if any Street 10 WEST BROAD STAFFT City CUUMBUS State ZIP Code + 4	9. Business deals with: a. Labor Organization b. Trust c. Employer
10. If 9.b. or 9.c. is checked give trust or employer's name. Name CLEVELAND SALES TO THE TRUST TO THE STAND TO THE SALES	11.a. Nature of such dealing. INVESTMENT MANIAGERE
P.O. Box, Bldg., Room No., if any Street 1820 = 197H STOCKED City Q1645UANO	11.b. Approximate dollar value of such dealing. 12.a. Nature of interest held or income received.
State ZIP Code + 4	VENDOR SPANSORED DINNER AND DISCUSSION 12.b. Amount. \$ 150.00
or from any labor relations consultant to an employer any payment of mone 13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.
Trade Name, if any: P.O. Box, Bidg., Room No., if any	
Street City State ZIP Code + 4	
13.b. Is the Business an Employer or Consultant ?	14.b. Amount of payment

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Name of Person Filing AVL F. LABUDA	File Number U-
B. Held an interest in or derived income or economic benefit with monetary valus ubstantial part of which consists of buying from, selling or leasing to, or otherword an employer whose employees your labor organization represents or is active (2) any part of which consists of buying from or selling or leasing directly or indicating with your labor organization or with a trust in which your labor organization.	ise dealing with the business ely seeking to represent, or ectly to, or otherwise
8. Name and address of Business (including trade name, if any). Name UKISHAD BAKENS FILTER Trade Name, if any: P.O. Box, Bldg., Room No., if any Street S705 9TH S7245 City UKKELAND State CHIO ZIP Ccde + 4	9. Business deals with: a. Labor Organization b. Trust c. Employer
10. If 9.b. or 9.c. is checked give trust or employer's name. Name UNELLAND BAILERS + TEDMINSTELLA Trade Name, if any: P.O. Box, Bldg., Room No., if any	11.a. Nature of such dealing.
Street 1870 = 1971 Street	11.b. Approximate dollar value of such dealing.
State OHIO ZIP Code + 4 LILL	THE DEFINITIONS FOR ATRICLE AT NATIONAL LABOR AND MANAGEMENT CLUTTEREN CE
	12.b. Amount. 70
C. Received from any employer (other than an employer covered under from any labor relations consultant to an employer any payment of money	er parts A and B above) or other thing of value.
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any). Name Trade Name, if any:	14.a. Nature of payment.
P.O. Box, Bldg., Room No., if any Street	Nº 1A

14.b. Amount of paymert.

13.b. Is the Business an Employer

State

Z·P Code + 4

or Consultant

File Number U-AUL F. LAGUDA Name of Person Filing B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested. 8. Name and address of Business (including trade name, if any). 9. Business deals with: a. Labor Organization Trade Name, if any: P.O. Box, Bldg., Room No., if any c. Employer MARHINGTON ZIP Code + 4 2000.5 11.a. Nature of such dealing. 10. If 9.b. or 9.c. is checked give trust or employer's name. INVESTMENT ADVISOR t waterne and pension t Trade Name, if any: P.O. Box, Bldg., Room No., if any 11.b. Approximate dollar value of such dealing. 12.a. Nature of interest held or income received. CLUENT CONFERENCE MEALS + ACTIVITIES C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value. 14.a. Nature of payment. 13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any). Name Trade Name, if any: NA P.O. Box, Bldg., Room No., if any Street City · ZIP Code + 4 State 14.b. Amount of payment. or Consultant 13.b. Is the Business an Employer

File Number U-Name of Person Filing B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested. 8. Name and address of Business (including trade name, if any). 9. Business deals with: 🖟 a. Labor Organization Trade Name, if any: D. Trust P.O. Box, Bldg., Room No., if any c. Employer CHECANO 11.a. Nature of such dealing. 10. If 9.b. or 9.c. is checked give trust or employer's name. INVESTMENT MANAGEL Trade Name, if any: P.O. Box, Blog., Room No., if any 11.b. Approximate dollar value of such dealing. 12.a. Nature of interest held or income received. ENDOR SPEASMED DINNER + DISCUSSION 12.b. Amount C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value. 14.a. Nature of payment. 13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any). Name Trade Name, if any: MIA P.O. Box, Bidg., Room No., if any Street City ZIP Gode + 4 14.b. Amount of payment or Consultant 13.b. Is the Business an Employer

L F. LEBUDA File Number U-Name of Person Filing B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested. 8. Name and address of Business (including trade name, if any). 9. Business deals with: a. Labor Organization P.O. Box, Bldg., Room No., if any c. Employer 11.a. Nature of such dealing. 10. If 9.b. or 9.c. is checked give trust or employer's name. Nam CLEARING BINEARS OF THIM THE HONDELLY WESTAND AND DENSION FURIERS INVESTMENT MANAGERL Trade Name, if any: P.O. Box, Bldg., Room No., if any Approximate dollar value of such dealing. 12.a. Nature of interest held or income received. VENDORE SPINSONERO DINNER + DISCUSSION C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value. 14.a. Nature of payment. 13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any). Name Trade Name, if any: NIA P.O. Box, Bldg., Room No., if any Street City ZIP Code + 4 State 14.b. Amount of payment 13.b. Is the Business an Employer : or Consultant 1 1

File Number U-Name of Person Filing B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trus' in which your labor organization is interested. 8. Name and address of Business (including trade name, if any). 9. Business deals with: Name BOYD WITHERSON ASSEST! MINNARE MOST, LLC a. Labor Organization Trade Name, if any: P.O. Box, Bldg., Room No., if any c. Employer Street 1801 E 9TH STRUMET City CLEVELAND State OHTU 11.a. Nature of such dealing. 10. If 9.b. or 9.c. is checked give trust or employεr's name. Name Cleutuhul Boneault The Matthe Henry
And Welfare + PEUS 1000 1 10005 INVERTMENT MANAGEL Trade Name, if any: P.O. Box, Bldg., Room No., if any Street 1870 = 19TH 5TM 11.b. Approximate dollar value of such dealing. city Cleverano 12.a. Nature of interest held or income received. 21F Code + 4 44114 VENOCIE SENSOLU EXENT AND DECOSSION C. Received from any employer (other than an employer covered under parts A and B above)

14.a. Nature of payment.
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14.b. Amount of payment

File Number U-

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, setting or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or se ling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested. 8. Name and address of Business (including trade r.ame, if any). 9. Business deals with: Name FAVIEWER, MUSICOVITE & PHILLIPS, LCP. Trade Name, if any: b. Trust P.O. Box, Bldg., Room No., if any c. Employer Street 830 W SUPHERIONS. ANE City CLEMENTAND ZIP Code + 4 44113 11.a. Nature of such dealing. 10. If 9.b. or 9.c. is checked give trust or employer's name. LEBAL CANDICAL FOR Name BUTGM LOCALUNIAN NO. 19 hour organizations Trade Name, if any: P.O. Box, Bldg., Room No., if any Street / 870 € 1977 57000 11.b. Approximate dollar value of such dealing. 12.a. Nature of interest held or income received.

13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.	
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Trade Name, if any:	· :	
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13.b. Is the Business an Employer or Consultant?	14.b. Amount of payment.	A SECTION OF THE PROPERTY OF T

B. Held an interest in or derived income or economic benefit with monetary values substantial part of which consists of buying from, selling or leasing to, or otherw of an employer whose employees your labor organization represents or is active (2) any part of which consists of buying from or selling or leasing directly or indicating with your labor organization or with a trust in which your labor organization.	rise dealing with the business ely seeking to represent, or rectly to, or otherwise
8. Name and address of Business (including trade name, if any). Name MACPONAST FIONCINES SERVICES IN	9. Business deals with: a. Labor Organization
P.O. Box, Bldg., Room No., if any Street \$50\$ /STH STREET IN. W.	C. Employer
State D.C. ZIP Code + 4 2 100 5	
Name OF BLOWN BANES TO FINDS TO STATE AND POUR OF FUNDS Trade Name, if any: P.O. Box, Bldg., Room No., if any	11.a. Nature of such dealing. INUESTREAT ADVISOR
Street 1820 € 1974 570 500	11.b. Approximate dollar value of such dealing.
State Office 21F Code + 4 44/14	12.a. Nature of interest held or income received. HOLIDAY BIFT 12.b. Amount.
C. Received from any employer (other than an employer covered und	er parts A and B above)

13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.	•
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13.b. Is the Business an Employer or Consultant?	14.b. Amount of payment.	

AUL F. LARVOA File Number U-Name of Person Filing B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested. 8. Name and address of Business (including trade name, if any). 9. Business deals with: a. Labor Organization P.O. Box, Bidg., Room No., if any c. Employer Street | 870 E 1914 Street CL EULLAND State OHIO ZIP Code + 4 44114 11.a. Nature of such dealing. 10. If 9.b. or 9.c. is checked give trust or employer's name. Name CIEVELAND BAKANS + TRANSPORMS
FUNDS PENSION TRUSTEE Trade Name, if any: P.O. Box, Bldg., Room No., if any Street 1870 € 1974 STMGT 11.b. Approximate dollar value of such dealing. CITY CUBIELAND 12.a. Nature of interest held or income received. CONFERENCE REGISTRATION 12.b. Amount. C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value. 14.a. Nature of payment. 13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any). Name Trade Name, if any: 3 P.O. Box, Bldg., Room No., if any · ZIP Code + 4 State 14.b. Amount of payment or Consultant 13.b. Is the Business an Employer

Name of Person Filing PAUL F LABRIDA	File Number U-
3. Held an interest in or derived income or economic benefit with monetary values to be substantial part of which consists of buying from, selling or leasing to, or other of an employer whose employees your labor organization represents or is act 2) any part of which consists of buying from or selling or leasing directly or indealing with your labor organization or with a trust in which your labor organization.	envise dealing with the business tively seeking to represent, or ndirectly to, or otherwise
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C. Received from any employer (other than an employer covered un or from any labor relations consultant to an employer any payment of mon	nder parts A and B above)
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13.b. Is the Business an Employer or Consultant 1 ?	14.b. Amount of paymert.

File Number U-F. LANGUAR Name of Person Filing B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested. 9. Business deals with: 8. Name and address of Business (including trade name, if any). a. Labor Organization Trade Name, if any: P.O. Box, Bldg., Room No., if any c. Employer 1870 E 19TH STREET CLEVELAND 11.a. Nature of such dealing. 10. If 9.b. or 9.c. is checked give trust or employer's name. TAFT HARTLEN FUND IN WHICH I AM A THRETICIPANTIN + Trade Name, if any: P.O. Box, Bldg., Room No., if any TRUSTEE OF 11.b. Approximate dollar value of such dealing. 12.a. Nature of interest held or income received. DINNER FOR STAFF AT THUS T SPONSORIED ENENT OUT OF TOWN C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value. 14.a. Nature of payment. 13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any). Name Trade Name, if any: P.O. Box, Bidg., Room No., if any State 14.b. Amount of payment 13.b. Is the Business an Employer

Name of Person Filing

PAUL F. LESSUDA

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or Consultant

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B. Held an interest in or derived income or economic be self with honerary various substantial part of which consists of buying from, selling or leasing to or othen of an employer whose employees your labor organization represents or is actively any part of which consists of buying from or selling or leasing directly or indicating with your labor organization or with a trust in which your labor organization.	wise dealing with the business vely seeking to represent, or lirectly to, or otherwise
8. Name and address of Business (including trade name, if any). Name BARLERS LIGATED FUND Trade Name, if any: P.O. Box, Bidg., Room No., if any Street Show ZIP Ccde + 4 10. If 9.b. or 9.c. is checked give trust or employer's name. Name BCTGM QCAS UNICA MARIE Trade Name, if any: P.O. Box, Bidg., Room No., if any Street Show Street Stre	9. Business deals with: 2. Labor Organization 2. b. Trust 2. c. Employer 11.a. Nature of such dealing. TAFT HAPPAREN FINIO IN WHICH I AM A PRIFIC PANT IN + TRUSPE OF 11.b. Approximate dollar value of such dealing. 12.a. Nature of interest held or income received. PINNEY: OR STAFF ATTRUST SPONSURE: EVENT OUT OF TOWN
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or from any labor relations consultant to an employer any payment of mone 13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any). Name Trade Name, if any:	14.a. Nature of payment.
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13.b. Is the Business an Employer

Street

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